No. W 115217 Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Due no later than Jun 30, 2018 Annual Report Form			2. Registered Agent and Address (NO PO BOX) TAMMY CASTLE 19601 QUEENS CROWN RD CAREY ID 83320 3. New Registered Agent Signature:*			
		1. Mailing Address: Correct in this box if needed. CASTLE'S TWIN FALLS, LLC TAMMY CASTLE PO BOX 98 CAREY ID 83320		CAREY ID 8				
				3. <u>New</u> Register				
4. Limited Liability Compar	nies: Enter Nai	mes and Addres	ses of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER	RICHARD K	CASTLE	144 LITTLE WOOD RD	CAREY	ID	USA	83320	
MEMBER	TAMARA L	CASTLE	144 LITTLE WOOD RD	CAREY	ID	USA	83320	
MEMBER	GREGORY J	KADLEC	3116 LAURELWOOD DRIVE	TWIN FALLS	ID	USA	83320	
5. Organized Under the Laws of:		6. Annual Repo	ort must be signed.*					
ID		Signature: 7	Tamara Castle		Date: 06/19/2018			
W 115217		Name (type	or print): Tamara Castle		Title: Secretary			
Processed 06/19/2018		* Electronically	provided signatures are accepted as origina	l signatures.				